



Application No. (if known): 10/627,355

Attorney Docket No.: 05986/100K520-US1

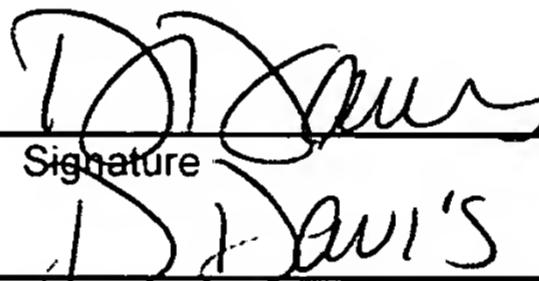
Certificate of Express Mailing Under 37 CFR 1.10

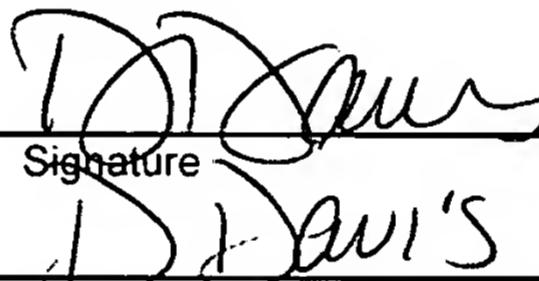
I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. in an envelope addressed to:

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Commissioner for Patents
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on September 22, 2009
Date


Signature


Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (1 page)

One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)

Transmittal (1 page)

Notice of Appeal (1 page)

Charge \$335.00 to deposit account 04-0100

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PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
is a collection of information required by 37 CFR 1.10. (GSA GEN REG 27 CFR 1.10)

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<p><i>Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.</i></p> <p><i>Effective on 12/08/2004.</i> <i>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</i></p> <p>FEE TRANSMITTAL For FY 2009</p>		<p>Complete if Known</p>	
		Application Number	10/627,355-Conf. #2328
		Filing Date	July 24, 2003
		First Named Inventor	Rodolfo R. Llinas
		Examiner Name	P. D. Coughlan
		Art Unit	2129
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	
TOTAL AMOUNT OF PAYMENT		(\$) 335.00	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	52	26
Each independent claim over 3 (including Reissues)	220	110
Multiple dependent claims	390	195

Total Claims **Extra Claims** **Fee (\$)** **Fee Paid (\$)** **Multiple Dependent Claims**

or HP = x = Fee (\$) Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

✓ If greater number of total claims paid for, if greater than 25.

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)

- or HP = x =
HP = highest number of independent strings valid for if greater than 2.

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer

listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50

sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)

- 100 = /50 = (round up to a whole number) x =

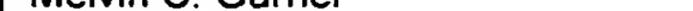
4. OTHER FEE(S) **Fees Paid (\$)**

Non-English Specification: \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 2251 Extension for response within first month 65.00

2401 Notice of appeal 270.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	26,272	Telephone	(212) 527-7700
Name (Print/Type)	Melvin C. Garner			Date	September 22, 2009

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	10/627,355-Conf. #2328
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Examiner Name	P. D. Coughlan
Total Number of Pages in This Submission	Attorney Docket Number 05986/100K520-US1

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DARBY & DARBY P.C.		
Signature			
Printed name	Melvin C. Garner		
Date	September 22, 2009	Reg. No.	26,272